

12/22/01  
12/22/01

## ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO.                | DATE |
|---------------------------|----------|-----------------------|------|
| FEE DETERMINATION         |          |                       |      |
| O.I.P.E. CLASSIFIER       |          |                       |      |
| FORMALITY REVIEW          | AM       | 15 103000<br>12/21/00 |      |
| RESPONSE FORMALITY REVIEW |          |                       |      |

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
= ..... Allowed I ..... Interference  
- (Through numeral).... Canceled A ..... Appeal  
÷ ..... Restricted O ..... Objected

| Claim    | Date     |
|----------|----------|
| Final    |          |
| Original | 5-3-02   |
| 1        | 12-22-01 |
| 2        | 12-22-01 |
| 3        | 12-22-01 |
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| Claim    | Date     |
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| Final    |          |
| Original | 4-5-02   |
| 51       | 12-22-01 |
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| Claim    | Date |
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| Final    |      |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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